## APPENDIX B: Variables Suggested for Exclusion from the MDS-PAC Instrument

During the pilot and field testings of versions 7-9 of the MDS-PAC, a number of assessors (Registered Nurses, Physical Therapists, or Occupational Therapists) were asked to rate which items on the MDS-PAC they would suggest dropping. Based on these findings, the MDS-PAC no longer includes 104 items that were originally field tested in Version 8 of the instrument. The table below describes the percentage of assessors by facility type (rehabilitation hospital or skilled nursing facility) who recommended dropping each of the MDS-PAC items displayed in the table. The table is broken down by the type of facility in which the assessor was employed. The items in the table below are the majority of the items that are now in the version of the MDS-PAC found in Appendix BB.

Table 1.--Percent of Assessors by the Type of Facility Who Recommended Remo

		Percent of Assessors k Recommended Removal of
MDS-PAC Item Number	MDS-PAC Item	Rehabilitation Hospitals
A1A	First Name	0
A1B	Middle Initial	0
A1C	Last Name	0
A1D	Jr/Sr	0
A3	Reason for Assessment	5.9
A5A	Medical Stabilization	5.8
A5B	Rehab/Functional Improvement	4.7
A5C	Recuperation	12.8
A5D	Monitor to Avoid Clinical Complication	9.2
A5E	Palliative Care	18.6
A6	Admitted from	6.5
A7A	Time of Onset of Precipitating Event	15.4
A7B	Reason Most Recent Acute Care Hospitalization	8.6
A8A	Primary Payment Source for Stay	2.3
A8B	Secondary Payment Source for Stay	5.7
A9	Marital Status	4.7
AA10	Gender	0
AA11	Birthdate	0
AA12A	American Indian/Alaskan Native	12.0
AA12B	Asian	12.0
AA12C	Black or African-American	12.0
AA12D	Native Hawaiian or Other Pacific Islander	12.0
AA12E	White	12.0
AA12F	Hispanic or Latino	15.4

		Percent of Assessors t Recommended Removal of
MDS-PAC		
Item Number	MDS-PAC Item	Rehabilitation Hospitals
AA13	Date of Reentry	12.9
A10	Education	10.3
A11A	Primary Language	1.2
A11B	Other Language	2.4
A12	Dominant Hand	9.2
A13	Mental Health History	12.3
A14	Conditions Related to MR/DD Status	12.5
A15A	Legal Guardian	7.5
A15B	Other Legal Oversight	7.5
A15C	Durable Power of Attorney/Health	7.5
A15D	Patient Responsible for Self	7.5
A16A	Living Will	11.5
A16B	Do Not Resuscitate	13.8
A16C	Do Not Hospitalize	16.1
A16D	Other Treatment Restrictions	13.8
A16E	None of the above	12.6
AA2A	Date of Entry	3.1
AA4	Assessment Reference Date	0
AA6A	Social Security #	3.4
AA6B	Medicare #	0
AA7	Medical Record #	2.3
AA8A	State #	6.9
AA8B	Federal #	4.7
AA9	Medicaid #	1.2
B1	Comatose	14.8
B2A	Short-term Memory Ok	0
B2B	Long-term Memory Ok	0
B2C	Situational Memory Ok	8.2
B2D	Procedural Memory Ok	5.9
B3A	Decisions Regarding Tasks of Daily Life	2.3

		Percent of Assessors k Recommended Removal of
MDS-PAC		
Item Number	MDS-PAC Item	Rehabilitation Hospitals
B3B	Status Compared to 30 Days Ago	6.9
B4A	Easily Distracted	5.7
B4B	Periods of Altered Perception	5.7
B4C	Episodes of Disorganized Speech	5.7
B4D	Periods of Restlessness	5.7
B4E	Periods of Lethargy	6.1
B4F	Mental Function Varies over Course of Day	7.4
C1	Hearing	3.4
C2A	Hearing Aid	4.5
C2B	Lip Reading	4.9
C2C	Signs/Gestures/Jokes	5.7
C2D	Message to Express Needs	4.5
C2E	None of the Above	4.5
C3A	Expressing Information Content	1.1
C3B	Status Compared to 30 Days Ago	8.0
C2	Speech Clarity	0
C5A	Verbal Content	0
C5B	Status Compared to 30 Days Ago	7.0
C6A	See in Adequate Light W/Glasses	1.2
C6B	More Impaired in Vision	7.4
D1A	Patient Made Negative Statements	3.8
D1B	Persistent Anger W/Self or Others	3.8
D1C	Expressions of Unrealistic Fears	11.5
D1D	Repetitive Anxious Complaints	7.7
D1E	Repetitive Health Complaints	11.5
D1F	Sad, Pained, Facial Expressions	7.7
D1G	Crying, Tearfulness	3.8
D1H	Repetitive Physical Movements	11.5
D1IS	Insomnia/change in Sleep Patterns	3.8
D1J	W/draw from Activities of Interest	11.5

		Percent of Assessors k Recommended Removal of
MDS-PAC	T	Troopining a rome (a. c.
Item Number	MDS-PAC Item	Rehabilitation Hospitals
D1K	Reduced Social Interaction	7.7
D2	Mood Persistence	4.8
D3A	Wandering- Freq	3.4
D3B	Verbal Abuse Behavior-freq	4.6
D3C	Physical Abuse Behavior-freq	3.4
D3D	Social Inappropriate Behavior-freq	3.4
D3E	Resists Care- Freq	3.4
E10AA	Leg-Joint	4.7
E10AB	Voluntary Motor Control Leg	5.1
E10AC	Intact Touch Leg	7.6
E10BA	Arm-Joint	4.7
E10BB	Voluntary Motor Control Arm	5.1
E10BC	Intact Touch Arm	7.6
E10CA	Trunk & Neck- Joint	7.0
E10CB	Vol. Motor Control-trunk&Arm	7.6
E10CC	Intact Touch Trunk&Arm	8.9
E1A	Bed Mobility- 3 Days	2.4
E1B	Transfer Bed/Chair- 3 Days	2.4
E1C	Locomotion- 3 Days	2.4
E1D	Walk in Corridor- 3 Days	4.7
E1E	Dressing Upper Body- 3 Days	2.4
E1F	Dressing Lower Body- 3 Days	2.4
E1G	Eating- 3 Days	2.4
E1H	Toilet Use- 3 Days	2.4
E1I	Transfer Toilet- 3 Days	2.3
E1J	Personal Hygiene- 3 Days	2.3
E1K	Bathing- 3 Days	2.4
E1L	Transfer Tub/shower- 3 Days	4.7
E3	ADL Areas Now More Impaired	4.0
E4A	Meal Preparation- Now	4.5

		Percent of Assessors k Recommended Removal of
MDS-PAC		Recommended Removal of
Item Number	MDS-PAC Item	Rehabilitation Hospitals
E4C	Phone Use- Now	10.2
E4D	Medication Management- Now	4.5
E4E	Stairs- Now	4.5
E4F	Car Transfer- Now	5.7
E5	IADL Areas Now More Impaired	3.8
E6A	Cane/Crutch	0
E6B	Walker	2.3
E6C	Wheeled- Not Motorized	2.5
E6D	Adaptive Eating Utensil	0
E6E	Mechanical Lift	3.4
E6F	Orthotics/Prosthesis	0
E6G	Postural Support	3.4
E6H	Slide Board	3.4
E6I	Other Adaptive Device	2.3
E6J	None of Above	2.5
E7A	Hours of Physical Activity- past 24 Hrs	6.5
E7B	Hours of Physical Activity-30 Days Ago	29.4
E8A	Distance Walk W/o Sit Down- Consistently	4.6
E8B	Walking Support Provided	11.1
E9A	Moved from Seated to Standing	8.0
E9B	Turned Around Face Opposite Direction	14.8
F1A	Control of Urinary Bladder	0
F1B	Continence Compared to 30 Days Ago	4.5
F2A	External Catheter	1.1
F2B	Indwelling Catheter	2.3
F2C	Intermittent Cath	2.5
F2F	Pads, Briefs	3.7
F4	Bowel Continence	1.1
F5	Bowel Appliances	2.5
G2A	Diabetes Mellitus	0

## Percent of Assessors k **Recommended Removal of MDS-PAC Item Number MDS-PAC Item Rehabilitation Hospitals** G2AA A Multiple Sclerosis G2AB Parkinson's Disease 0 G2AC 0 Quadriplegia G2AD Seizure Disorder 0 G2AE Spinal Cord Dysfunction- Nontraumatic 0 G2AF Spinal Cord Dysfunction- Traumatic 0 G2AG Stroke 0 **Anxiety Disorder** G2AH 0 G2AI Depression 0 G2AJ Other Psychiatric Disorder 0 G2AK 0 Asthma COPD G2AL 0 G2AM Emphysema 0 G2AN Cancer 4.2 Post Surgery- Non Orthopedic 4.2 G2AO G2AP Renal Failure 0 G2AQ None of Above 0 G2B Hypothyroidism 0 G2C 0 Cardiac Arrhythmias G2D Congestive Heart Failure 0 G2E Coronary Artery Disease 0 G2F Deep Vein Thrombosis 0 G2G 0 Hypertension G2H Hypotension 0 G2I Peripheral Vascular Disease 0 G2J Post Acute MI 0 G2K 0 Post Heart Surgery G2L Pulmonary Embolism 0 G2M Pulmonary Failure 0 G2N Other Cardiovascular Disease 0

		Percent of Assessors t Recommended Removal of
MDS-PAC		
Item Number	MDS-PAC Item	Rehabilitation Hospitals
G2O	Fracture- Hip	0
G2P	Fracture- Lower Extremity	0
G2Q	Fracture(s)- Other	0
G2R	Osteoarthritis	0
G2S	Osteoporosis	0
G2T	Rheumatoid Arthritis	0
G2U	Alzheimer's Disease	0
G2V	Aphasia or Apraxia	0
G2W	Cerebral Palsy	0
G2X	Dementia Other than Alzheimer's	0
G2Y	Hemiplegia/Hemiparesis	0
G3A	Antibiotic Resistant Infection	0
G3B	Cellulitis	0
G3C	Hepatitis	1.2
G3D	HIV/AIDS	1.2
G3E	Pneumonia	0
G3F	Osteomyelitis	0
G3G	Septicemia	1.2
G3H	Staphylococcus Infection	1.2
G3I	Tuberculosis (Active)	1.2
G3J	Urinary Tract Infection	0
G3K	Wound Infection	0
G3L	None of Above	0
G4AA	ICD-9-CM Diagnosis Code #1	10.8
G4AB	ICD-9-CM Code #1	8.4
G4BA	ICD-9-CM Diagnosis Code#2	10.8
G4BB	ICD-9-CM Code # 2	8.4
G4CA	ICD-9-CM Diagnosis Code #3	11.0
G4CB	ICD-9-CM Code #3	8.5
G4DA	ICD-9-CM Diagnosis Code #4	11.0

## Percent of Assessors k **Recommended Removal of** MDS-PAC **Item Number MDS-PAC Item Rehabilitation Hospitals** ICD-9-CM Code #4 G4DB 8.5 G4EA ICD-9-CM Diagnosis Code #5 12.2 G4EB ICD-9-CM Code #5 9.8 H1 Vital Signs 4.6 H2A Dizziness/Vertigo/Lightheaded 1.1 H2B Fell in past 7 Days 1.1 H2C 7.7 Fell in past 8 to 180 Days H3D Advanced Cardiac Failure 9.1 H2E 1.1 Chest Pain/Pressure on Exertion H2F Chest Pain/Pressure at Rest 1.1 H2G Edema- Generalized 1.1 H2H Edema-Localized 2.3 H2I 3.4 Edema-pitting H2J Impaired Aerobic Capacity 3.4 H2K 1.1 Constipation H2L Dehydrated 3.4 1.1 H2M Diarrhea H2N Internal Bleeding 3.8 H2O 2.3 Recurrent Nausea/Vomiting H2P Refuse/Inability to Take Liquids Orally 6.8 H2R fever 4.5 Fever H<sub>2</sub>S Hemi-neglect 4.5 H2T Cachexia (Severe Malnutrition) 6.8 H2U Morbid Obesity 3.4 H2V 4.5 End-stage Disease H2W None of Above 0 Inability to Lie Flat-Loss of Breath 2.3 Н3А H3B Shortness of Breath- Exertion 3.4 H3C 3.4 Shortness of Breath- Rest H3D Oxygen Saturation 3.4

		Percent of Assessors k Recommended Removal of
MDS-PAC	1	Recommended Removal of
Item Number	MDS-PAC Item	Rehabilitation Hospitals
H3E	Diff Cough/clearing Airway	3.4
H3F	Recurrent Aspiration	2.3
H3G	Recurrent Aspiration Infection	4.9
НЗН	None of Above	3.5
H4A	Highest Pressure Ulcer Stage	2.3
H4B	# of Current Pressure Ulcers	2.4
H4C	Length Multiplied by Width	4.7
H4D	Exudate Amount	4.7
H4E	Predominant Tissue	4.7
H4F	Total Push Score	4.7
H5A	# of Stasis Ulcers	3.4
H5B	# of Surgical Wounds	3.4
H5C	Ulcer Resolved/Healed	8.4
H6A	Burns	2.3
H6B	Open Lesions Excluding Foot	2.3
H6C	Rashes	1.1
H6D	Skin Tears or Cuts	1.1
H6E	None of Above	1.1
I1A	Freq Patient Complains of Pain	0
I1B	Intensity of Pain	0
I1C	Current Pain Status	7.3
J1A	Chewing Problem	1.2
J1B	Dental Problems	1.2
J2	Swallowing	1.2
J3A	Height in Inches	5.8
J3B	Weight in Pounds	7.0
J4A	Weight Loss	8.1
J4B	Weight Gain	8.2
J5A	Total Calories	3.5
J5B	Fluid Intake	4.6

		Percent of Assessors k Recommended Removal of
MDS-PAC	MDC DAC Item	Debabilitation Hamitala
Item Number	MDS-PAC Item	Rehabilitation Hospitals
K1A	Total # Physician Visits	21.6
K1B	# Times Phys/nurse Practitioner Called to Bedside	—
K1C	# Nurse Practitioner Visits	20.7
K1D	# Phys Asst Visits	20.7
K1E	# New or Changed Orders	14.9
K2AA	Diabetic Management	3.5
K2AB	At Dis-insulin Management	7.7
K2BA	Injections	7.7
K2BB	Injections at Discharge	8.3
K2CA	IV Antibiotics/meds	7.7
K2CB	At Dis- Iv Antibiotics/meds	7.7
K2DA	Application of Dressings	7.7
K2DB	Application of Dressings at Dis.	8.3
K2EA	Application of Ointments	7.7
K2EB	At Dis- Application of Ointments	7.7
K2GA	Nutrition/dehydration Intervention	7.7
K2GB	At Dis-nutrition/hydration Intervention	7.7
K2HA	Pressure Relieving Bed/Chair	3.8
K2HB	At Dis- Pressure Relieving Bed/Chair	7.7
K2IA	Turning and Repositioning	3.8
K2IB	At Dis- Turning and Repositioning	7.7
K2JA	Ulcer Care	7.7
K2JB	At Discharge- Ulcer Care	7.7
K2KA	Wound Care-Surgical	7.7
K2KB	At Dis- Wound Care Surgical	7.7
K2LA	Bladder Training	3.8
K2LB	At Dis- Bladder Training	8.3
K2MA	Scheduled Toileting	3.8
K2MB	At Dis- Scheduled Toileting	8.3
K2NA	Bowel Program	3.8

		Percent of Assessors k Recommended Removal of
MDS-PAC		Recommended Removal of
Item Number	MDS-PAC Item	Rehabilitation Hospitals
K2NB	At Dis- Bowel Program	8.3
K2OA	Cardiac Monitoring/ Rehab	11.5
K2OB	At Dis- Cardiac Monitoring	7.7
K2PA	Cast(s)	11.5
K2PB	At Dis- Cast(s)	7.7
K2QA	Continuous Positive Airway Pressure	11.5
K2QB	At Dis- Continuous Positive Airway Pressure	9.0
K2RA	Drains	3.8
K2RB	At Dis- Drains	7.7
K2SA	Dialysis	0
K2SB	At Dis- Dialysis	4.2
K2TA	Enteral Tube Feeding	0
K2TB	At Dis- Enteral Tube Feeding	6.5
K2UA	IV Line- Central	3.8
K2UB	At Dis- Central Iv Line	7.7
K2VA	IV Line- Peripheral	3.8
K2VB	At Dis- Peripheral Iv Line	7.7
K2WA	Ng Feeding Tube	0
K2WB	At Dis- NG Feeding Tube	6.4
K2XA	Oxygen	0
K2XB	At Dis- Oxygen	6.4
K2YA	Pain Management- Other than Drugs	7.7
K2YB	At Dis- Pain Management	7.7
K2ZA	Suctioning- Oral	0
K2ZB	At Dis- Suctioning- Oral	7.7
K2AAA	Suctioning- Tracheal	0
K2AAB	At Dis- Suctioning Tracheal	7.7
K2ABA	Tracheostomy Care	0
K2ABB	At Dis- Tracheostomy Care	6.4
K2ACA	Transfusion(s)	7.7

		Percent of Assessors t Recommended Removal of
MDS-PAC		
Item Number	MDS-PAC Item	Rehabilitation Hospitals
K2ACB	At Dis- Transfusion(s)	7.7
K2ADA	Ventilator or Respirator	7.7
K2ADB	At Dis- Vent. Or Resp.	9.0
K2AEA	Ventilator Weaning	7.7
K2AEB	At Dis- Ventilator Weaning	9.0
K2AFA	Train Family to Assist Patient	3.8
K2AFB	At Dis- Train Family to Assist Patient	6.4
K2AGA	Training in Health Maint	3.8
K2AGB	At Dis- Pat Train Skills Required after Discharge	6.4
K2AHA	Design and Implementation	3.8
K2AHB	At Dis- Social Service Design	7.7
K3AIA	None of Above	0
K3AIB	At Dis- None of Above	7.7
K3A	Range of Motion- Passive	4.5
K3B	Range of Motion- Active	4.5
K3C	Splint/Orthotic Assistance	4.5
K3D	Bed Mobility	4.5
K3E	Bladder/Bowel	3.4
K3F	Transfer	4.5
K3G	Walking	4.5
K3H	Dressing or Grooming	3.4
K3I	Eating or Swallowing	3.4
K3K	Communication	3.4
K4AA	Speech- Days Ordered	16.0
K4AB	Speech- Days Delivered	2.4
K4AC	Speech- Min Delivered	3.7
K4AD	Post Dis- Speech	4.0
K4BA	Ot- Days Ordered	17.3
K4BB	Ot- Days Delivered	2.4
K4BC	Ot- Min Delivered	2.5

		Percent of Assessors k Recommended Removal of
MDS-PAC		Recommended Removal of
Item Number	MDS-PAC Item	Rehabilitation Hospitals
K4BD	Post Dis- Ot	5.3
K4CA	Pt- Days Ordered	17.3
K4CB	Pt-Days Delivered	1.2
K4CC	Pt- Min Delivered	3.7
K4CD	Pt-Post Dis- Pt	5.3
K4DA	Resp. Therapy- Days Ordered	16.0
K4DB	Resp. Therapy- Days Delievered	2.4
K4DC	Resp. Therapy- Min. Delivered	3.7
K4DD	Post Dis- Resp.Therapy	4.0
K4EA	Psych Therapy- Days Ordered	18.5
K4EB	Psych Therapy- Days Delivered	3.7
K4EC	Psych Therapy- Min Delivered	3.7
K4ED	Post Dis- Psych Therapy	6.7
K4FA	Therapeutic Recreation- Days Ordered	18.7
K3FB	Therapeutic Recreation- Days Delivered	1.3
K3FC	Therapeutic Recreation- Min Delivered	5.3
K3FD	Post Dis- Therapeutic Recreation	6.7
K5A	Full Bed Rails on Both Sides	5.1
K5B	Other Types of Side Rails Used	6.4
K5C	Trunk Restraint	6.4
K5D	Chair Prevents Rising	7.7
L1A	Bed Mobility/Transfer	6.9
L1B	Dressing	6.9
L1C	Eating	6.9
L1D	Locomotion	6.9
L1F	Medication Managment	6.8
L1G	Pain Management	6.8
L2A	Believe Is Capable of Incr Indep.	5.7
L2B	Unable to Recognize New Limits	8.0
L2C	Fails to Initiate/Continue Adls	9.2

_		Percent of Assessors k Recommended Removal of
MDS-PAC		
Item Number	MDS-PAC Item	Rehabilitation Hospitals
L3A	Functional Status- Last 3 Days	9.2
L3B	Health Status- Last 3 Days	9.3
L4	Estimated Length of Stay	2.3
M1A	Emotional Support	0
M1B	Intermit Phys Support- less than Daily	0
M1C	Intermit Phys Support- Daily	0
M1D	Full Time Physical Support	0
M1E	All or Most of Nec Transportation	0
M2A	Family Overwhelmed by Pat. Illness	4.2
M2B	Family Relationship Require Great Deal of Staff Time	4.2
МЗАА	Type of Residence- Pre	2.3
M3AB	Type of Residence- Discharge	0
M3AC	Temp. Type of Residence	5.0
МЗВА	Lived With- Pre	2.5
M3BB	Live With- Disch	0
МЗВС	Temp Live(d) With	5.3
N1C	Date Assessment Coord Signed	0